

SENATE BILL 3268

By Tracy

AN ACT to amend Tennessee Code Annotated, Title 49
and Title 68, relative to athletic activity by youth.

WHEREAS, concussions are one of the most commonly reported injuries in children and adolescents who participate in sports and recreational activities. The Centers for Disease Control and Prevention estimate that as many as three million nine hundred thousand sports-related and recreation-related concussions occur in the United States each year. A concussion is caused by a blow or motion to the head or body that causes the brain to move rapidly inside the skull. The risk for long-term, chronic cognitive, physical, and emotional symptoms associated with the development of post-concussion syndrome and chronic traumatic encephalopathy, as well as the risk for catastrophic injuries or even death, is significant when a concussion or head injury is not properly recognized, evaluated, and managed; and

WHEREAS, concussions are a type of brain injury that can range from mild to severe and can disrupt the way the brain normally works. Concussions can occur in any organized or unorganized sport or recreational activity and can result from a fall or from players colliding with each other, the ground, or with obstacles. Concussions occur with or without loss of consciousness, but the vast majority occurs without loss of consciousness; and

WHEREAS, continuing to play with a concussion or symptoms of head injury leaves the young athlete especially vulnerable to greater injury and even death. The general assembly of Tennessee recognizes that, despite having generally recognized return-to-play standards for concussions and head injury, some affected youth athletes are prematurely returned to play resulting in actual or potential physical injury or death to youth athletes in the state of Tennessee; and

WHEREAS, the general assembly of Tennessee further recognizes that it is in the best interest of the state to create a uniform education, training, and return-to-play protocol to be followed throughout the state; now, therefore,

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. Tennessee Code Annotated, Title 49, Chapter 6, is amended by adding the following as a new part:

49-6-____.

(a) As used in this section, unless the context otherwise requires:

(1) "Health care provider" means a licensed medical doctor (M.D.), osteopathic physician (D.O.), or a clinical neuropsychologist with concussion training; and

(2) "Youth athletic activity" means an organized athletic activity where the majority of the participants are seven (7) years of age or older and under nineteen (19) years of age, and are engaging in an organized athletic game or competition against another team, club, or entity or in practice or preparation for an organized game or competition against another team, club, or entity. "Youth athletic activity" does not include college or university activities or an activity which is entered into for instructional purposes only, an athletic activity that is incidental to a nonathletic program, or a lesson.

(b)

(1) The governing authority of each public and nonpublic elementary school, middle school, junior high school, and high school shall:

(A) Work in concert with the department of education and the Tennessee secondary school athletic association (TSSAA) to develop the guidelines and other pertinent information and forms to inform and

educate coaches, school administrators, youth athletes, and their parents or guardians of the nature and risk of concussion and head injury including continuing to play after concussion or head injury;

(B) Require completion of a concussion recognition and head injury safety education course program annually by all coaches, whether such coach is employed or a volunteer, school athletic directors, and a parent or legal guardian of a child who participates in an extracurricular activity. In developing the program, the department may use any of the materials readily available from the centers for disease control and prevention. The program shall include, but not be limited to:

(i) Current training in recognizing the signs, symptoms of potentially catastrophic head injuries, concussions and injuries related to second impact syndrome;

(ii) The necessity of obtaining proper medical attention for a person suspected of having sustained a concussion; and

(iii) The nature and risk of concussions, including the danger of continuing to play after sustaining a concussion and the proper method and statutory requirements which must be satisfied in order for a youth athlete to return to play in the athletic activity;

(C) Require that on a yearly basis, a concussion and head injury information sheet be signed and returned by each coach and athletic director to the lead administrator of the local education agency (LEA) prior to initiating practice or competition for the year;

(D) Require that on a yearly basis, a concussion and head injury information sheet be signed and returned by the youth athlete and the

athlete's parent or guardian prior to the youth's initiating practice or competition. The information sheet shall include, but not be limited to:

(i) Written information related to the recognition of symptoms of head injuries;

(ii) The biology and the short-term and long-term consequences of a concussion;

(iii) A summary of department rules and regulations relative to safety regulations for students participation in extracurricular athletic activities; and

(iv) The medical protocol for post-concussion participation or participation in an extracurricular athletic activity;

(E) If a youth athlete is suspected to have suffered a concussion or head injury while participating in an extracurricular athletic activity, remove the youth athlete from the practice or competition immediately; and

(F) Require that a youth athlete who has been removed from play not return to the practice or competition during which the student suffered, or is suspected to have suffered, a concussion and not return to play or participate in any supervised team activities involving physical exertion, including games, competitions, or practices, until the youth athlete is evaluated by a health care provider and receives written clearance from the health care provider for a full or graduated return to play.

(2) After a youth athlete who has sustained a concussion or head injury has been evaluated and received clearance for a graduated return to play from a health care provider, an organization or association of which a school or school

district is a member, a private or public school, may allow a licensed athletic trainer with specific knowledge of the athlete's condition to manage the athlete's graduated return to play.

SECTION 2. This act shall take effect July 1, 2012, the public welfare requiring it and shall apply to athletic activities occurring in the 2012-2013 school year and thereafter.